## **2002 UNIFORM BUSINESS REPORT (UBR)** FILED Apr 29, 2002 8:00 am Secretary of State DOCUMENT # **N99000002396** 1. Entity Name **RUSSIAN CLUB OF CENTRAL FLORIDA. INC.** 04-29-2002 90183 036 \*\*\*\*70 00 Principal Place of Business Mailing Address 381 MAINSAIL CT. 381 MAINSAIL CT. LAKE MARY FL 32746 LAKE MARY FL 32746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3569882 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BANAEV, YAROSLAV 381 MAINSAIL CT LAKE MARY FL 32746 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DP TITLE ☐ Delete TITLE ☐ Change Addition NAME BANAEV, YAROSLAV NAME STREET ADDRESS STREET ADDRESS 381 MAINSAIL CT CITY-ST-ZIF CITY-ST-ZIP LAKE MARY FL 32746 TITLE DVP ☐ Detete TITLE ☐ Change ☐ Addition NAME BANAEV, YELENA NAME STREET ADDRESS 381 MAINSAIL CT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LAKE MARY FL 32746 TITLE = ← MANAGER ☐ Delete TITLE ☐ Change ☐ Addition NAME MALININ, VLADIMIR NAME STREET ADDRESS 381 MAINSAIL CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

TAROSEAV) SIGNATURE: IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered,

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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